PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents NON 5 4 50002 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (703) 746-4000 INSTRUCTIONS: This form should be used to can smitting the SSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the partition and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Jenell Lawson Intellectual Property Deaprtment Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. CuraGen Corporation 555 Long Wharf Drive, 9th Floor New Haven, CT 06511 06/27/2005 MBERHE1 00000110 502648 09973424 (Depositor's name 700.00 DA (Signature) 01 FC:2501 300.00 DA 02 FC:1504 (Date 2005 CONFIRMATION NO. APPLICATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. FILING DATE 09/973424 09-OCT-01 Prayaga, Sudhirdas 15966-585 CIP 2 8925 (CURA 85CD2) TITLE OF INVENTION: POLICE DEICKS AND POLICE OF INVENTION: HOPEL

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APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) D	UE DATE DUE	
Non-provisional	YES	700.00	o o	300.00	1,000.00	5/10/2005	
EXAM	INER .	ART UN	ır	CLASS-SUBCLASS]		
Andres, GINGT L. 1646			135-325000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON TO			2 registered patent attorneys or agents. If no name is listed, no name will be printed.			3 CuraGen Corporation	

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) New Haven, CT 06511 CuraGen Corporation ☐ Individual ☐ Corporation or other private group entity ☐ Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): ✓ Issue Fee A check in the amount of the fee(s) is enclosed. ☑ Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Advance Order - # of Copies Deposit Account Number 50, 2648 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). ☑ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

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Date June 22, 2005

Typed or printed name George M. Vahwak Registration No. 26, 824

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Jenell Lawson Intellectual Property Cura Gen Corporation 555 Long Wharf Drive New Haven, CT 06551 OS/23/2005

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EXAMINER

ANDRES, JANET L

PAPER NUMBER

ART UNIT

DATE MAILED: 05/23/2005

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/973.424	10/09/2001	Sudhirdas K. Prayaga	15966-585CIP2	8925

TITLE OF INVENTION: POLYPEPTIDES AND POLYNUCLEOTIDES HOMOLOGOUS TO THYMOSIN, EPHRIN A RECEPTORS, AND FIBROMODULIN

٢	APPLN. TYPE	SMALL ENTITY ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	NO	\$1400	\$300	\$1700	08/23/2005

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID-ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

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If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

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- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.
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- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

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5.26.05